Evidence about Ponseti treatment for clubfoot
Treatment of Idiopathic Clubfoot: A thirty-year follow up note. Cooper and Dietz. JBJS 77A, 1477

- N=45
- 71 idiopathic clubfeet
- Ponseti Treatment
- Started before 4 m
- Age at f.up = 34 y
- Questionnaire
- Radiographs
- Physical Exam
- Pedobarograph
- Electrogoniometry

- Comparison Group of patients in waiting area of Ophthalmology Clinic answered questionnaire
Treatment of Idiopathic Clubfoot: A thirty-year follow up note. Cooper and Dietz. JBJS 77A, 1477

• Results: outcomes
  – Excellent = Foot does not limit activities of daily living, and is either never painful or only occasionally causes mild pain
  – Good = Occasionally limits activities of daily living or strenuous activities, or is painful after strenuous activities.
  – Poor = Limits daily activities or routine walking, or causes pain during routine activities or at night
Treatment of Idiopathic Clubfoot: A thirty-year follow up note. *Cooper and Dietz. JBJS 77A, 1477*

**Results: Clubfeet**
- Excellent = 62%
- Good = 16%
- Poor = 22%

**Results: Comparison Group**
- Excellent = 63%
- Good = 22%
- Poor = 15%
Evaluation of Ponseti Method for Conservative Management of Idiopathic Clubfeet. *Herzenberg J.E. et al*

*University of Maryland*

- Started Ponseti in 1997
- Retrospective review of 1st 27 Patients/34 feet
- Serial casting begun within first three months of life
- All casts applied by senior author
- Severity and side matched control group from pre 1997
- Parameter studied = need to perform PMR
- Follow up > 1 year

*University of Maryland*

### Results

<table>
<thead>
<tr>
<th></th>
<th>PMR required</th>
<th>Average casting duration</th>
<th>Final dorsiflexion</th>
<th>Final plantar-flexion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ponseti group</td>
<td>1/34 (3%)</td>
<td>2 months</td>
<td>32°</td>
<td>50°</td>
</tr>
<tr>
<td>Control group</td>
<td>32/34 (94%)</td>
<td>3 months</td>
<td>8°</td>
<td>29°</td>
</tr>
</tbody>
</table>
Evaluation of the Iowa (Ponseti) Technique for the treatment of the idiopathic clubfoot W. Lehman, Hospital for Joint Diseases, New York

- n = 37 feet
- 36 corrected, 1 failed correction (TS<1.5)
- 36 fitted with foot abduction Brace
- Compliant with brace
  - All remained corrected (n=27)
- Non compliant with brace (n=9)
  - Remained corrected = 3, recurrence = 6
Early Experience with the Ponseti Method of managing the Congenital Clubfoot deformity at Mulago Hospital, Kampala

- 6/12 survey (2000)
- Mulago Clubfoot Clinic, Kampala
- 40 infants, 64 feet
- ~6.6 weeks at start rx
- ~7.4 weeks casting
- 45 tenotomies
- 53/64 feet corrected
- 11/64 uncorrected
  - 4 syndromic
  - 4 untrained Orth Officer
  - 3?

Q. Can the congenital clubfoot deformity be corrected in Uganda with the Ponseti Method?

A. >80% of congenital clubfeet can be corrected by trained orthopaedic officers & physiotherapists